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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attori	ney Docket No.	2002P18305US01					
First Inventor		Mary Balogh					
Title	A System for Pro	cessing Unpaid Healthcare Claims					

(Only for new nonprovision	nal applications under 37 CFR 1.53(b)) E)	<u> (press</u>	Mail Label No) E V 2	<u> 286 855</u>	296 US			
APPLICA		ADD	RESS TO:	Box Pat	tent Applica					
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	orm (e.g., PTO/SB/17) duplicate for fee processing)		7	CD-ROM or CI						
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2. Applicant claims small entity status. See 37 CFR 1.27.			(if applicable all responses)							
Specification	[Total Pages 28]		`	Computer Re		orm (CRF)				
3. (preferred arrangement	t set forth below)		a				ω. <u>}</u>			
- Descriptive title	of the invention the to Related Applications		b. S	pecification Sequ	ence List	ting on:	>,			
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- Background of			c Statements verifying identity of above copies							
- Brief Summary - Brief Descriptio	n of the Drawings (<i>if filed</i>)		A	CCOMPANY	NG AP	PLICATI	ON PARTS			
- Detailed Descri			9.	Assignment P	apers (co	over sheet	& document(s))			
- Claim(s)			37 CFR 3 73/b) Statement Power of							
- Abstract of the	Disclosure		10.	(when there is			ل Attorney			
4. Drawing(s) (35 U	S.C. 113) Total Sheets 10	7,	11.	English Trans	slation Do	ocument (if	applicable)			
4. Diawing(s) (35 0	.S.C. 113) [Total Sheets	_	1				Copies of IDS			
5. Oath or Declaration]]	12.	Statement (ID	OS)/PTO-	1449	Citations				
a. Newly execu	uted (original or copy) prior application (37 CFR 1.63 (d))		13.	Preliminary A						
b. Copy from a (for continua	n	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)								
i. DELET		15.	Certified Cop	y of Prior ority is cla	rity Docume aimed)	∍nt(s)				
	Itement attached deleting inventor(s) The prior application, see 37 CFR		16.	Nonpublication						
1.63(d)(2)	and 1.33(b).		10. L			must attach	n form PTO/SB/3			
	0			or its equivale	ent.					
6. Application Data Sheet. See 37 CFR 1.76										
	CATION, check appropriate box, and	d supply t	he requi	isite information b	elow and	l in a prelim	inary amendmen			
or in an Application Data She										
Continuation	Divisional Continuation-in-part	(CIP)	of	f prior application No.:_		/				
Prior application information:	Prior application information: Examiner: Group Art Unit:									
	ONAL APPS only: The entire disclosure									
	f the disclosure of the accompanying co relied upon when a portion has been in						orated by referenc			
	19. CORRESPO									
										
Customer Number or Bar Co	ode Label (Insert Customer No. or Att.	ach bar cod	e label hen	or _	Co.	rrespondence .	address below			
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	Howarder Buil	f			- í Ì	1	27/2003			
Signature	HILLINGUELL WILLIAM	1			U	ate 06/	£1/2000			

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PTO/SB/17 (01-03) Approved for use through 04/30/2003. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL Application Number To be assigned for FY 2003 Filing Date Herewith First Named Inventor Mary Balogh Effective 01/01/2003. Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit (\$) 750.00 TOTAL AMOUNT OF PAYMENT 2002P18305US01 Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Check Credit card Money Other 3. ADDITIONAL FEES None Order Large Entity | Small Entity Deposit Account: Fee Fee Fee **Fee Description** Deposit Code (\$) Code (\$) <u>Fee Paid</u> 19-2179 Account 1051 130 2051 65 Surcharge - late filing fee or oath Number Deposit Surcharge - late provisional filing fee or 1052 50 2052 Account cover sheet Name 1053 130 Non-English specification 1053 130 The Commissioner is authorized to: (check all that apply) 1812 2.520 1812 2,520 For filing a request for ex parte reexamination ✓ Charge fee(s) indicated below Credit any overpayments 920 920* Requesting publication of SIR prior to 1804 1804 Charge any additional fee(s) during the pendency of this application Examiner action Charge fee(s) indicated below, except for the filing fee 1805 1,8401 1805 1,840* Requesting publication of SIR after to the above-identified deposit account. 1251 110 2251 Extension for reply within first month **FEE CALCULATION** 2252 205 Extension for reply within second month 1252 410 1. BASIC FILING FEE 1253 930 2253 465 Extension for reply within third month arge Entity Small Entity Fee Paid **Fee Description** 1254 1,450 2254 725 Extension for reply within fourth month 1255 1,970 2255 985 Extension for reply within fifth month 1001 750 2001 375 Utility filing fee 750.00 1002 330 2002 165 320 2401 160 Notice of Appeal Design filing fee 2402 160 Filing a brief in support of an appeal 1003 520 2003 260 Plant filing fee 1402 320 280 2403 140 Request for oral hearing 1004 750 2004 375 1403 Reissue filing fee 1451 1.510 1451 1005 160 1,510 Petition to institute a public use proceeding 2005 80 Provisional filing fee 1452 110 2452 55 Petition to revive - unavoidable SUBTOTAL (1) (\$) 750.00 1453 1,300 2453 650 Petition to revive - unintentional 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1,300 2501 650 Utility issue fee (or reissue) Fee from Extra Claims 1502 below 470 2502 235 Design issue fee Total Claims -20*1 1503 630 2503 315 Plant issue fee Independent 1460 130 1460 130 Petitions to the Commissioner Multiple Dependent 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) Large Entity **Small Entity** 180. 1806 180 1806 180 Submission of Information Disclosure Stmt **Fee Description** Fee 40 Recording each patent assignment per Code (\$) Code (\$) 8021 40 8021 property (times number of properties) 1202 18 2202 9 Claims in excess of 20 375 Filing a submission after final rejection (37 CFR 1.129(a)) 1809 750 2809 1201 84 2201 42 Independent claims in excess of 3 Multiple dependent claim, if not paid 1203 280 2203 140 1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))

SUBMITTED BY (Complete (if applicable)										
Name (Print/Type)	Alexander J. Burke	1 6	Registration No. (Attorney/Agent)	40,425	Telephone	732-321-3023				
Signature	H leg Dules	Kid			Date	June 27, 2003				

1801

1802

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Other fee (specify)

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375 Request for Continued Examination (RCE)

SUBTOTAL (3) (\$) 180

900 Request for expedited examination

of a design application

1204

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42

SUBTOTAL (2)

**or number previously paid, if greater; For Reissues, see above

Reissue independent claims over original patent

** Reissue claims in excess of 20

and over original patent

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